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SERIAL NUMBER 09/931,218	FILING OR 371(c) DATE 08/16/2001 RULE	CLASS 585	GROUP ART UNIT 1764	ATTORNEY DOCKET NO. LBPP-0004
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APPLICANTS

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**** CONTINUING DATA *******

This application is a DIV of 09/527,175 03/17/2000 PAT 6,278,035 *TN, YES*

**** FOREIGN APPLICATIONS *******

TN, NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

08/30/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OK	SHEETS DRAWING 2	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>TN</i>				

ADDRESS

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TITLE

Apparatus for C2 recovery

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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